

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

MasterCard International Inc. Employees' PAC

ADDRESS (number and street)

2000 Purchase St.

☐Check if different
than previously
reported. (ACC)

Purchase

NY

10577

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00410274

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☒July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2009

through

06

30

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Christine Maiolo

Signature of Treasurer

Electronically Filed by Christine Maiolo

Date

07

27

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

A. Form/Schedule : **F3X**

Transaction ID :

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

3 / 112

Write or Type Committee Name

MasterCard International Inc. Employees' PAC

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2009	96191.18
(b) Cash on Hand at Beginning of Reporting Period	96191.18	
(c) Total Receipts (from Line 19)	79667.00	79667.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	175858.18	175858.18
7. Total Disbursements (from Line 31)	93495.13	93495.13
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	82363.05	82363.05
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

4 / 112

Write or Type Committee Name

MasterCard International Inc. Employees' PAC

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	69185.50	69185.50
(ii) Unitemized	10481.50	10481.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)	79667.00	79667.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	79667.00	79667.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	79667.00	79667.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	79667.00	79667.00

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	595.13	595.13	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	595.13	595.13	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	92500.00	92500.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	400.00	400.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	400.00	400.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	93495.13	93495.13	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	93495.13	93495.13	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

6 / 112

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	79667.00	79667.00
34. Total Contribution Refunds (from Line 28(d))	400.00	400.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	79267.00	79267.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	595.13	595.13
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	595.13	595.13

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Douglas Bausch

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Brand Standards

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 3 / 2 0 0 9

Transaction ID: 1044bb22ab30911f3bd

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

Gregory Box

Mailing Address 2200 Mastercard Boulevard

City

State

Zip Code

O Fallon

MO

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP Technology Account Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-7-13-46

Amount of Each Receipt this Period

62.00

C.

Full Name (Last, First, Middle Initial)

Gregory Box

Mailing Address 2200 Mastercard Boulevard

City

State

Zip Code

O Fallon

MO

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP Technology Account Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-6-14-1

Amount of Each Receipt this Period

62.00

SUBTOTAL of Receipts This Page (optional)

169.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Gregory Box

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP Technology Account Management

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-6-12-0

Amount of Each Receipt this Period

62.00

B.

Full Name (Last, First, Middle Initial)

Jim Carrington

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Global Product Group Executive, Global

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1455.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 0 3 / 2 0 0 9

Transaction ID: 7ec9b113e947ef1f6f8

Amount of Each Receipt this Period

291.00

C.

Full Name (Last, First, Middle Initial)

Jim Carrington

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Global Product Group Executive, Global

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1455.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 3 / 2 0 0 9

Transaction ID: 60c1a42f361b0b3bd2a

Amount of Each Receipt this Period

291.00

SUBTOTAL of Receipts This Page (optional)

644.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Jim Carrington

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Global Product Group Executive, Global

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1455.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 3 / 2 0 0 9

Transaction ID: 37aa9fc4ae772ba9e2e

Amount of Each Receipt this Period

291.00

B.

Full Name (Last, First, Middle Initial)

Jim Carrington

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Global Product Group Executive, Global

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1455.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 8 / 2 0 0 9

Transaction ID: a588e18d89f395ecaba

Amount of Each Receipt this Period

291.00

C.

Full Name (Last, First, Middle Initial)

Jim Carrington

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Global Product Group Executive, Global

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1455.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 8 / 2 0 0 9

Transaction ID: 13bee2a435f1bcd906b

Amount of Each Receipt this Period

291.00

SUBTOTAL of Receipts This Page (optional)

873.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 112

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Joe Casale

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Business Leader, Product Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	5	/	2	0	0	9

Transaction ID: 20090311-82-15-29

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Joe Casale

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Business Leader, Product Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	5	/	2	0	0	9

Transaction ID: 20090415-82-13-46

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

Joe Casale

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Business Leader, Product Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	5	/	2	0	0	9

Transaction ID: 20090513-80-14-1

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Joe Casale

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Business Leader, Product Management

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-79-12-0

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Andrew Cheskis

Mailing Address 100 Manhattanville Road

City

State

Zip Code

Purchase

NY

10577-2134

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/General Auditor

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-20-13-46

Amount of Each Receipt this Period

350.00

C.

Full Name (Last, First, Middle Initial)

Andrew Cheskis

Mailing Address 100 Manhattanville Road

City

State

Zip Code

Purchase

NY

10577-2134

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/General Auditor

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-19-14-1

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional)

775.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Andrew Cheskis

Mailing Address 100 Manhattanville Road

City

State

Zip Code

Purchase

NY

10577-2134

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/General Auditor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-19-12-0

Amount of Each Receipt this Period

350.00

B.

Full Name (Last, First, Middle Initial)

Diane Dann

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Counsel Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-25-14-1

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Diane Dann

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Counsel Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-25-12-0

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Heidi Davidson

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Director State Govt Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 5 / 2 0 0 9

Transaction ID: 20090114-15-12-0

Amount of Each Receipt this Period

350.00

B.

Full Name (Last, First, Middle Initial)

Heidi Davidson

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Director State Govt Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 9

Transaction ID: 20090212-36-11-38

Amount of Each Receipt this Period

350.00

C.

Full Name (Last, First, Middle Initial)

Heidi Davidson

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Director State Govt Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 5 / 2 0 0 9

Transaction ID: 20090311-38-15-29

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional)

1050.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Heidi Davidson

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Director State Govt Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-37-14-1

Amount of Each Receipt this Period

350.00

B.

Full Name (Last, First, Middle Initial)

Heidi Davidson

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Director State Govt Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-37-12-0

Amount of Each Receipt this Period

350.00

C.

Full Name (Last, First, Middle Initial)

Colm Dobbyn

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Asst. General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 9

Transaction ID: 20090212-24-11-38

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

825.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Colm Dobbyn

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Asst. General Counsel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 5 / 2 0 0 9

Transaction ID: 20090311-25-15-29

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)

Colm Dobbyn

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Asst. General Counsel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-26-13-46

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

Colm Dobbyn

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Asst. General Counsel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-24-14-1

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

375.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 112

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Colm Dobbyn

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Asst. General Counsel

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	5		2	0	9	

Transaction ID: 20090611-24-12-0

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)

Michael Ellison

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Financial Analysis

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	9	

Transaction ID: 20090212-49-11-38

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

Michael Ellison

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Financial Analysis

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	9	

Transaction ID: 20090311-52-15-29

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Michael Ellison

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Financial Analysis

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-52-13-46

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Michael Ellison

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Financial Analysis

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-51-14-1

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Michael Ellison

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Financial Analysis

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-51-12-0

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Lawrence Flanagan

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2509

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Chief Marking Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 5 / 2 0 0 9

Transaction ID: 20090114-10-12-0

Amount of Each Receipt this Period

416.00

B.

Full Name (Last, First, Middle Initial)

Lawrence Flanagan

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2509

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Chief Marking Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 9

Transaction ID: 20090212-27-11-38

Amount of Each Receipt this Period

416.00

C.

Full Name (Last, First, Middle Initial)

Lawrence Flanagan

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2509

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Chief Marking Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 5 / 2 0 0 9

Transaction ID: 20090311-29-15-29

Amount of Each Receipt this Period

416.00

SUBTOTAL of Receipts This Page (optional)

1248.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Lawrence Flanagan

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2509

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Chief Marking Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-30-13-46

Amount of Each Receipt this Period

416.00

B.

Full Name (Last, First, Middle Initial)

Lawrence Flanagan

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2509

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Chief Marking Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-28-14-1

Amount of Each Receipt this Period

416.00

C.

Full Name (Last, First, Middle Initial)

Lawrence Flanagan

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2509

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Chief Marking Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-28-12-0

Amount of Each Receipt this Period

416.00

SUBTOTAL of Receipts This Page (optional)

1248.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Tucker Foote

Mailing Address 1401 Eye Street Northwest Suite 2

City

Washington

State

DC

Zip Code

20005-2225

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Business Leader, Public Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 1 / 2 0 0 9

Transaction ID: 72d530a3fe036c37a44

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)

Tucker Foote

Mailing Address 1401 Eye Street Northwest Suite 2

City

Washington

State

DC

Zip Code

20005-2225

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Business Leader, Public Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 1 / 2 0 0 9

Transaction ID: 0491b92570dff08ba80

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

Tucker Foote

Mailing Address 1401 Eye Street Northwest Suite 2

City

Washington

State

DC

Zip Code

20005-2225

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Business Leader, Public Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 1 / 2 0 0 9

Transaction ID: f484bfc26c12c557e22

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

375.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Tucker Foote

Mailing Address 1401 Eye Street Northwest Suite 2

City

Washington

State

DC

Zip Code

20005-2225

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Business Leader, Public Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 0 9

Transaction ID: d9251ed10c415314c02

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)

Tucker Foote

Mailing Address 1401 Eye Street Northwest Suite 2

City

Washington

State

DC

Zip Code

20005-2225

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Business Leader, Public Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 1 / 2 0 0 9

Transaction ID: 0a1d5c4cc8f131d0b86

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

Gareth Forsey

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2509

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Cust Business Plan/Analys

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 5 / 2 0 0 9

Transaction ID: 20090114-5-12-0

Amount of Each Receipt this Period

416.00

SUBTOTAL of Receipts This Page (optional)

666.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Gareth Forsey

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2509

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Cust Business Plan/Analys

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 9

Transaction ID: 20090212-29-11-38

Amount of Each Receipt this Period

416.00

B.

Full Name (Last, First, Middle Initial)

Gareth Forsey

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2509

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Cust Business Plan/Analys

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 5 / 2 0 0 9

Transaction ID: 20090311-31-15-29

Amount of Each Receipt this Period

416.00

C.

Full Name (Last, First, Middle Initial)

Gareth Forsey

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2509

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Cust Business Plan/Analys

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-32-13-46

Amount of Each Receipt this Period

416.00

SUBTOTAL of Receipts This Page (optional)

1248.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Gareth Forsey

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2509

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Cust Business Plan/Analys

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-30-14-1

Amount of Each Receipt this Period

416.00

B.

Full Name (Last, First, Middle Initial)

Gareth Forsey

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2509

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Cust Business Plan/Analys

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-30-12-0

Amount of Each Receipt this Period

416.00

C.

Full Name (Last, First, Middle Initial)

Raye Forsey

Mailing Address 55 Dirksen Dr

City

State

Zip Code

Wilton

CT

06897-4609

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Spouse of Employee

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 9 / 2 0 0 9

Transaction ID: 66c6e0e830bddc4562a

Amount of Each Receipt this Period

416.00

SUBTOTAL of Receipts This Page (optional)

1248.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Raye Forsey

Mailing Address 55 Dirksen Dr

City

Wilton

State

CT

Zip Code

06897-4609

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Spouse of Employee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 9 / 2 0 0 9

Transaction ID: 23e9f57d29820323360

Amount of Each Receipt this Period

416.00

B.

Full Name (Last, First, Middle Initial)

Raye Forsey

Mailing Address 55 Dirksen Dr

City

Wilton

State

CT

Zip Code

06897-4609

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Spouse of Employee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 9 / 2 0 0 9

Transaction ID: 37b620e93de4d306a9a

Amount of Each Receipt this Period

416.00

C.

Full Name (Last, First, Middle Initial)

Raye Forsey

Mailing Address 55 Dirksen Dr

City

Wilton

State

CT

Zip Code

06897-4609

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Spouse of Employee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 9 / 2 0 0 9

Transaction ID: 5597d171fda44e84c63

Amount of Each Receipt this Period

416.00

SUBTOTAL of Receipts This Page (optional)

1248.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Raye Forsey

Mailing Address 55 Dirksen Dr

City

Wilton

State

CT

Zip Code

06897-4609

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Spouse of Employee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 9 / 2 0 0 9

Transaction ID: 8cb3077e00892a522f6

Amount of Each Receipt this Period

416.00

B.

Full Name (Last, First, Middle Initial)

Raye Forsey

Mailing Address 55 Dirksen Dr

City

Wilton

State

CT

Zip Code

06897-4609

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Spouse of Employee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 9 / 2 0 0 9

Transaction ID: 7ae7e79279ceec0d7f9

Amount of Each Receipt this Period

416.00

C.

Full Name (Last, First, Middle Initial)

John Gallagher

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Financial Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 0 9

Transaction ID: 20090212-53-11-38

Amount of Each Receipt this Period

124.00

SUBTOTAL of Receipts This Page (optional)

956.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

John Gallagher

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Financial Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 5 / 2 0 0 9

Transaction ID: 20090311-57-15-29

Amount of Each Receipt this Period

124.00

B.

Full Name (Last, First, Middle Initial)

John Gallagher

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Financial Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-57-13-46

Amount of Each Receipt this Period

124.00

C.

Full Name (Last, First, Middle Initial)

John Gallagher

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Financial Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-55-14-1

Amount of Each Receipt this Period

124.00

SUBTOTAL of Receipts This Page (optional)

372.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 112

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

John Gallagher

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Financial Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	5	/	2	0	0	9

Transaction ID: 20090611-55-12-0

Amount of Each Receipt this Period

124.00

B.

Full Name (Last, First, Middle Initial)

Gene Galliani

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Leader, Systems Programming

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	5	/	2	0	0	9

Transaction ID: 20090513-50-14-1

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Gene Galliani

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Leader, Systems Programming

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	5	/	2	0	0	9

Transaction ID: 20090611-50-12-0

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

224.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Dora Hanft

Mailing Address 670 W End Ave

City

New York

State

NY

Zip Code

10025-7313

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Spouse of Employee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 1 / 2 0 0 9

Transaction ID: bc77eda21f7af36e99d

Amount of Each Receipt this Period

416.00

B.

Full Name (Last, First, Middle Initial)

Dora Hanft

Mailing Address 670 W End Ave

City

New York

State

NY

Zip Code

10025-7313

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Spouse of Employee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 1 / 2 0 0 9

Transaction ID: 80e8069602e0313b5e1

Amount of Each Receipt this Period

416.00

C.

Full Name (Last, First, Middle Initial)

Dora Hanft

Mailing Address 670 W End Ave

City

New York

State

NY

Zip Code

10025-7313

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Spouse of Employee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 1 / 2 0 0 9

Transaction ID: 82f0e095c205dae0cd0

Amount of Each Receipt this Period

208.00

SUBTOTAL of Receipts This Page (optional)

1040.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Dora Hanft

Mailing Address 670 W End Ave

City

New York

State

NY

Zip Code

10025-7313

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Spouse of Employee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 1 / 2 0 0 9

Transaction ID: 572fc9dd60590166d4c

Amount of Each Receipt this Period

208.00

B.

Full Name (Last, First, Middle Initial)

Dora Hanft

Mailing Address 670 W End Ave

City

New York

State

NY

Zip Code

10025-7313

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Spouse of Employee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 0 9

Transaction ID: 2819f0083dfbf721517

Amount of Each Receipt this Period

208.00

C.

Full Name (Last, First, Middle Initial)

Dora Hanft

Mailing Address 670 W End Ave

City

New York

State

NY

Zip Code

10025-7313

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Spouse of Employee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 1 / 2 0 0 9

Transaction ID: 7d1809a7279050c7d9f

Amount of Each Receipt this Period

208.00

SUBTOTAL of Receipts This Page (optional)

624.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 112

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Noah Hanft

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	5	/	2	0	0	9

Transaction ID: 20090114-82-12-0

Amount of Each Receipt this Period

416.00

B.

Full Name (Last, First, Middle Initial)

Noah Hanft

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	0	9

Transaction ID: 20090212-16-11-38

Amount of Each Receipt this Period

416.00

C.

Full Name (Last, First, Middle Initial)

Noah Hanft

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	5	/	2	0	0	9

Transaction ID: 20090311-17-15-29

Amount of Each Receipt this Period

416.00

SUBTOTAL of Receipts This Page (optional)

1248.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 112

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Noah Hanft

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	5	/	2	0	0	9

Transaction ID: 20090415-17-13-46

Amount of Each Receipt this Period

416.00

B.

Full Name (Last, First, Middle Initial)

Noah Hanft

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	5	/	2	0	0	9

Transaction ID: 20090513-16-14-1

Amount of Each Receipt this Period

416.00

C.

Full Name (Last, First, Middle Initial)

Noah Hanft

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	5	/	2	0	0	9

Transaction ID: 20090611-16-12-0

Amount of Each Receipt this Period

416.00

SUBTOTAL of Receipts This Page (optional)

1248.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Robert Hariegel

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Leader, Strategic Sourcing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-32-14-1

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Robert Hariegel

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Leader, Strategic Sourcing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-32-12-0

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Justin Howe

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Finance Leader, Financial Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

868.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 5 / 2 0 0 9

Transaction ID: 20090311-61-15-29

Amount of Each Receipt this Period

167.00

SUBTOTAL of Receipts This Page (optional)

267.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Justin Howe

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Finance Leader, Financial Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

868.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-61-13-46

Amount of Each Receipt this Period

167.00

B.

Full Name (Last, First, Middle Initial)

Justin Howe

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Finance Leader, Financial Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

868.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-59-14-1

Amount of Each Receipt this Period

167.00

C.

Full Name (Last, First, Middle Initial)

Justin Howe

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Finance Leader, Financial Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

868.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-59-12-0

Amount of Each Receipt this Period

167.00

SUBTOTAL of Receipts This Page (optional)

501.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Greg Howes

Mailing Address PO Box 25000

City

Raleigh

State

NC

Zip Code

27640-0100

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Global Solutions Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 5 / 2 0 0 9

Transaction ID: 20090311-73-15-29

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Greg Howes

Mailing Address PO Box 25000

City

Raleigh

State

NC

Zip Code

27640-0100

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Global Solutions Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-73-13-46

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Greg Howes

Mailing Address PO Box 25000

City

Raleigh

State

NC

Zip Code

27640-0100

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Global Solutions Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-71-14-1

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Greg Howes

Mailing Address PO Box 25000

City

Raleigh

State

NC

Zip Code

27640-0100

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Global Solutions Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-71-12-0

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

James Hull

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Group Head, Engineering Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 9

Transaction ID: 20090212-32-11-38

Amount of Each Receipt this Period

124.00

C.

Full Name (Last, First, Middle Initial)

James Hull

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Group Head, Engineering Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 5 / 2 0 0 9

Transaction ID: 20090311-34-15-29

Amount of Each Receipt this Period

124.00

SUBTOTAL of Receipts This Page (optional)

348.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

James Hull

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Group Head, Engineering Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-35-13-46

Amount of Each Receipt this Period

124.00

B.

Full Name (Last, First, Middle Initial)

James Hull

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Group Head, Engineering Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-33-14-1

Amount of Each Receipt this Period

124.00

C.

Full Name (Last, First, Middle Initial)

James Hull

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Group Head, Engineering Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-33-12-0

Amount of Each Receipt this Period

124.00

SUBTOTAL of Receipts This Page (optional)

372.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Joan Kelly

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Systems Enhancement Stratg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1740.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 5 / 2 0 0 9

Transaction ID: 20090114-53-12-0

Amount of Each Receipt this Period

290.00

B.

Full Name (Last, First, Middle Initial)

Joan Kelly

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Systems Enhancement Stratg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1740.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 9

Transaction ID: 20090212-4-11-38

Amount of Each Receipt this Period

290.00

C.

Full Name (Last, First, Middle Initial)

Joan Kelly

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Systems Enhancement Stratg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1740.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 5 / 2 0 0 9

Transaction ID: 20090311-4-15-29

Amount of Each Receipt this Period

290.00

SUBTOTAL of Receipts This Page (optional)

870.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 112

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Joan Kelly

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Systems Enhancement Stratg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1740.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-4-13-46

Amount of Each Receipt this Period

290.00

B.

Full Name (Last, First, Middle Initial)

Joan Kelly

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Systems Enhancement Stratg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1740.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-3-14-1

Amount of Each Receipt this Period

290.00

C.

Full Name (Last, First, Middle Initial)

Joan Kelly

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Systems Enhancement Stratg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1740.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-3-12-0

Amount of Each Receipt this Period

290.00

SUBTOTAL of Receipts This Page (optional)

870.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Mike Kelly

Mailing Address 1401 Eye Street Northwest Suite 2

City

Washington

State

DC

Zip Code

20005-2225

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/NA Business Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-61-12-0

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

Claire Le Gal

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2509

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Business Leader, Fraud Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-27-14-1

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Claire Le Gal

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2509

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Business Leader, Fraud Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-27-12-0

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

135.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Pamela Leach

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Member Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

870.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 9

Transaction ID: 20090212-3-11-38

Amount of Each Receipt this Period

145.00

B.

Full Name (Last, First, Middle Initial)

Pamela Leach

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Member Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

870.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 5 / 2 0 0 9

Transaction ID: 20090311-3-15-29

Amount of Each Receipt this Period

145.00

C.

Full Name (Last, First, Middle Initial)

Pamela Leach

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Member Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

870.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-3-13-46

Amount of Each Receipt this Period

145.00

SUBTOTAL of Receipts This Page (optional)

435.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Pamela Leach

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Member Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

870.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-2-14-1

Amount of Each Receipt this Period

145.00

B.

Full Name (Last, First, Middle Initial)

Pamela Leach

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Member Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

870.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-2-12-0

Amount of Each Receipt this Period

145.00

C.

Full Name (Last, First, Middle Initial)

Mary Lester

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Bus Resources-Communication

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 7 / 2 0 0 9

Transaction ID: e01b7c110663807574c

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

540.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Linda Locke

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Public Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-13-13-46

Amount of Each Receipt this Period

62.00

B.

Full Name (Last, First, Middle Initial)

Linda Locke

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Public Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-12-14-1

Amount of Each Receipt this Period

62.00

C.

Full Name (Last, First, Middle Initial)

Linda Locke

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Public Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-12-12-0

Amount of Each Receipt this Period

62.00

SUBTOTAL of Receipts This Page (optional)

186.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Michael Manchisi

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 5 / 2 0 0 9

Transaction ID: 20090114-64-12-0

Amount of Each Receipt this Period

416.00

B.

Full Name (Last, First, Middle Initial)

Michael Manchisi

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 0 9

Transaction ID: 20090212-19-11-38

Amount of Each Receipt this Period

416.00

C.

Full Name (Last, First, Middle Initial)

Michael Manchisi

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 5 / 2 0 0 9

Transaction ID: 20090311-20-15-29

Amount of Each Receipt this Period

416.00

SUBTOTAL of Receipts This Page (optional)

1248.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Michael Manchisi

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-21-13-46

Amount of Each Receipt this Period

416.00

B.

Full Name (Last, First, Middle Initial)

Michael Manchisi

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-20-14-1

Amount of Each Receipt this Period

416.00

C.

Full Name (Last, First, Middle Initial)

Michael Manchisi

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-20-12-0

Amount of Each Receipt this Period

416.00

SUBTOTAL of Receipts This Page (optional)

1248.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Kimberly Martin

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Systems Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-4-12-0

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

Bill Mathis

Mailing Address 100 Manhattanville Road

City

Purchase

State

NY

Zip Code

10577-2134

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Account Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1740.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 5 / 2 0 0 9

Transaction ID: 20090114-19-12-0

Amount of Each Receipt this Period

290.00

C.

Full Name (Last, First, Middle Initial)

Bill Mathis

Mailing Address 100 Manhattanville Road

City

Purchase

State

NY

Zip Code

10577-2134

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Account Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1740.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 9

Transaction ID: 20090212-39-11-38

Amount of Each Receipt this Period

290.00

SUBTOTAL of Receipts This Page (optional)

620.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Bill Mathis

Mailing Address 100 Manhattanville Road

City

State

Zip Code

Purchase

NY

10577-2134

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Account Leader

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1740.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 5 / 2 0 0 9

Transaction ID: 20090311-41-15-29

Amount of Each Receipt this Period

290.00

B.

Full Name (Last, First, Middle Initial)

Bill Mathis

Mailing Address 100 Manhattanville Road

City

State

Zip Code

Purchase

NY

10577-2134

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Account Leader

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1740.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-41-13-46

Amount of Each Receipt this Period

290.00

C.

Full Name (Last, First, Middle Initial)

Bill Mathis

Mailing Address 100 Manhattanville Road

City

State

Zip Code

Purchase

NY

10577-2134

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Account Leader

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1740.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-40-14-1

Amount of Each Receipt this Period

290.00

SUBTOTAL of Receipts This Page (optional)

870.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Bill Mathis

Mailing Address 100 Manhattanville Road

City

State

Zip Code

Purchase

NY

10577-2134

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Account Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1740.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-40-12-0

Amount of Each Receipt this Period

290.00

B.

Full Name (Last, First, Middle Initial)

John McAndrew

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 5 / 2 0 0 9

Transaction ID: 20090114-40-12-0

Amount of Each Receipt this Period

290.00

C.

Full Name (Last, First, Middle Initial)

John McAndrew

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 9

Transaction ID: 20090212-60-11-38

Amount of Each Receipt this Period

290.00

SUBTOTAL of Receipts This Page (optional)

870.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Ed McCraw

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Senior Business Leader, Corporate Comm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 9

Transaction ID: 20090212-72-11-38

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)

Ed McCraw

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Senior Business Leader, Corporate Comm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 5 / 2 0 0 9

Transaction ID: 20090311-75-15-29

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

Ed McCraw

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Senior Business Leader, Corporate Comm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-75-13-46

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

375.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Ed McCraw

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Senior Business Leader, Corporate Comm

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-73-14-1

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)

Ed McCraw

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Senior Business Leader, Corporate Comm

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-73-12-0

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

Chris McWilton

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Chief Financial Officer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 5 / 2 0 0 9

Transaction ID: 20090114-35-12-0

Amount of Each Receipt this Period

416.00

SUBTOTAL of Receipts This Page (optional)

666.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Chris McWilton

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 9

Transaction ID: 20090212-52-11-38

Amount of Each Receipt this Period

416.00

B.

Full Name (Last, First, Middle Initial)

Chris McWilton

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 5 / 2 0 0 9

Transaction ID: 20090311-55-15-29

Amount of Each Receipt this Period

416.00

C.

Full Name (Last, First, Middle Initial)

Chris McWilton

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-55-13-46

Amount of Each Receipt this Period

416.00

SUBTOTAL of Receipts This Page (optional)

1248.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Chris McWilton

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-54-14-1

Amount of Each Receipt this Period

416.00

B.

Full Name (Last, First, Middle Initial)

Chris McWilton

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-54-12-0

Amount of Each Receipt this Period

416.00

C.

Full Name (Last, First, Middle Initial)

John Meister

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Systems Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 5 / 2 0 0 9

Transaction ID: 20090311-15-15-29

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

932.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

John Meister

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Systems Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-15-13-46

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

John Meister

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Systems Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-14-14-1

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

John Meister

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Systems Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-14-12-0

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Shawn Miles

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Counsel Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 5 / 2 0 0 9

Transaction ID: 20090311-21-15-29

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Shawn Miles

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Counsel Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-22-13-46

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Shawn Miles

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Counsel Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-21-14-1

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Shawn Miles

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Counsel Sr

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-21-12-0

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Wendy Murdock

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2509

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Global Head of Product

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 9

Transaction ID: d7332efb2d0f8da1cd5

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Marion M. Murphy

Mailing Address 49 Cross Ln

City

Cos Cob

State

CT

Zip Code

06807-2615

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Spouse of Employee

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 6 / 2 0 0 9

Transaction ID: 27bee56c9569a2c3c99

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

6100.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 112

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Timothy Murphy

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Associate General Counsel

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	5		2	0	9	

Transaction ID: 20090114-21-12-0

Amount of Each Receipt this Period

416.00

B.

Full Name (Last, First, Middle Initial)

Timothy Murphy

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Associate General Counsel

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	9	

Transaction ID: 20090212-37-11-38

Amount of Each Receipt this Period

416.00

C.

Full Name (Last, First, Middle Initial)

Timothy Murphy

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Associate General Counsel

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	9	

Transaction ID: 20090311-39-15-29

Amount of Each Receipt this Period

416.00

SUBTOTAL of Receipts This Page (optional)

1248.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Timothy Murphy

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-39-13-46

Amount of Each Receipt this Period

416.00

B.

Full Name (Last, First, Middle Initial)

Timothy Murphy

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-38-14-1

Amount of Each Receipt this Period

416.00

C.

Full Name (Last, First, Middle Initial)

Timothy Murphy

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-38-12-0

Amount of Each Receipt this Period

416.00

SUBTOTAL of Receipts This Page (optional)

1248.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Kenneth Najour

Mailing Address 801 Brickell Avenue Suite 130

City

Miami

State

FL

Zip Code

33131-2951

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Senior Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 9

Transaction ID: 20090212-56-11-38

Amount of Each Receipt this Period

124.00

B.

Full Name (Last, First, Middle Initial)

Kenneth Najour

Mailing Address 801 Brickell Avenue Suite 130

City

Miami

State

FL

Zip Code

33131-2951

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Senior Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 5 / 2 0 0 9

Transaction ID: 20090311-60-15-29

Amount of Each Receipt this Period

124.00

C.

Full Name (Last, First, Middle Initial)

Kenneth Najour

Mailing Address 801 Brickell Avenue Suite 130

City

Miami

State

FL

Zip Code

33131-2951

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Senior Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-60-13-46

Amount of Each Receipt this Period

124.00

SUBTOTAL of Receipts This Page (optional)

372.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Kenneth Najour

Mailing Address 801 Brickell Avenue Suite 130

City

Miami

State

FL

Zip Code

33131-2951

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Senior Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-58-14-1

Amount of Each Receipt this Period

124.00

B.

Full Name (Last, First, Middle Initial)

Kenneth Najour

Mailing Address 801 Brickell Avenue Suite 130

City

Miami

State

FL

Zip Code

33131-2951

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Senior Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-58-12-0

Amount of Each Receipt this Period

124.00

C.

Full Name (Last, First, Middle Initial)

Heather Nolan

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Business Leader, Franchise Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-39-14-1

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

298.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Heather Nolan

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Business Leader, Franchise Management

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-39-12-0

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Patrick O'Sullivan

Mailing Address 100 Manhattanville Road

City

State

Zip Code

Purchase

NY

10577-2134

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Financial Analysis

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 0 9

Transaction ID: 20090212-18-11-38

Amount of Each Receipt this Period

124.00

C.

Full Name (Last, First, Middle Initial)

Patrick O'Sullivan

Mailing Address 100 Manhattanville Road

City

State

Zip Code

Purchase

NY

10577-2134

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Financial Analysis

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 5 / 2 0 0 9

Transaction ID: 20090311-19-15-29

Amount of Each Receipt this Period

124.00

SUBTOTAL of Receipts This Page (optional)

298.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Patrick O'Sullivan

Mailing Address 100 Manhattanville Road

City State Zip Code
Purchase NY 10577-2134

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation
VP/Financial Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-19-13-46

Amount of Each Receipt this Period

124.00

B.

Full Name (Last, First, Middle Initial)

Patrick O'Sullivan

Mailing Address 100 Manhattanville Road

City State Zip Code
Purchase NY 10577-2134

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation
VP/Financial Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-18-14-1

Amount of Each Receipt this Period

124.00

C.

Full Name (Last, First, Middle Initial)

Patrick O'Sullivan

Mailing Address 100 Manhattanville Road

City State Zip Code
Purchase NY 10577-2134

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation
VP/Financial Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-18-12-0

Amount of Each Receipt this Period

124.00

SUBTOTAL of Receipts This Page (optional)

372.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Joshua Peirez

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 7 / 2 0 0 9

Transaction ID: e3b39c464c4c4fa9a28

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Joshua Peirez

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 7 / 2 0 0 9

Transaction ID: 8807d59b9d2a964560e

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Joshua Peirez

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 7 / 2 0 0 9

Transaction ID: 68ff990572ed4a992d0

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Joshua Peirez

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Associate General Counsel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 7 / 2 0 0 9

Transaction ID: 2b6c1160e4cfe1e6f7b

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mike Pillatsch

Mailing Address 8755 West Higgins Road

City

State

Zip Code

Chicago

IL

60631-2708

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/NA Business Development

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 6 / 2 0 0 9

Transaction ID: 779fca1018fc1217795

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

Mike Pillatsch

Mailing Address 8755 West Higgins Road

City

State

Zip Code

Chicago

IL

60631-2708

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/NA Business Development

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 6 / 2 0 0 9

Transaction ID: 289882b24f9a59ba2ff

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Bob Reany

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Information Tech

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 0 9

Transaction ID: 20090212-12-11-38

Amount of Each Receipt this Period

110.00

B.

Full Name (Last, First, Middle Initial)

Bob Reany

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Information Tech

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 5 / 2 0 0 9

Transaction ID: 20090311-12-15-29

Amount of Each Receipt this Period

110.00

C.

Full Name (Last, First, Middle Initial)

Bob Reany

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Information Tech

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-12-13-46

Amount of Each Receipt this Period

110.00

SUBTOTAL of Receipts This Page (optional)

330.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Bob Reany

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Information Tech

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-11-14-1

Amount of Each Receipt this Period

110.00

B.

Full Name (Last, First, Middle Initial)

Bob Reany

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Information Tech

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-11-12-0

Amount of Each Receipt this Period

110.00

C.

Full Name (Last, First, Middle Initial)

Rob Reeg

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Systems Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 5 / 2 0 0 9

Transaction ID: 20090114-80-12-0

Amount of Each Receipt this Period

416.00

SUBTOTAL of Receipts This Page (optional)

636.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Rob Reeg

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Systems Development

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 9

Transaction ID: 20090212-10-11-38

Amount of Each Receipt this Period

416.00

B.

Full Name (Last, First, Middle Initial)

Rob Reeg

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Systems Development

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 5 / 2 0 0 9

Transaction ID: 20090311-10-15-29

Amount of Each Receipt this Period

416.00

C.

Full Name (Last, First, Middle Initial)

Rob Reeg

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Systems Development

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-10-13-46

Amount of Each Receipt this Period

416.00

SUBTOTAL of Receipts This Page (optional)

1248.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Rob Reeg

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Systems Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-9-14-1

Amount of Each Receipt this Period

416.00

B.

Full Name (Last, First, Middle Initial)

Rob Reeg

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

SVP/Systems Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-9-12-0

Amount of Each Receipt this Period

416.00

C.

Full Name (Last, First, Middle Initial)

Trina Reuben-Williams

Mailing Address 100 Manhattanville Road

City

Purchase

State

NY

Zip Code

10577-2134

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Managing Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-69-12-0

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

872.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Nat Paul Rosenberg

Mailing Address 8755 West Higgins Road

City

Chicago

State

IL

Zip Code

60631-2708

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Team Lead NA Business Dev

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-29-12-0

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

Alicio Ruiz

Mailing Address 801 Brickell Avenue Suite 130

City

Miami

State

FL

Zip Code

33131-2951

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Security & Risk Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 0 9

Transaction ID: 20090212-23-11-38

Amount of Each Receipt this Period

124.00

C.

Full Name (Last, First, Middle Initial)

Alicio Ruiz

Mailing Address 801 Brickell Avenue Suite 130

City

Miami

State

FL

Zip Code

33131-2951

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Security & Risk Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 5 / 2 0 0 9

Transaction ID: 20090311-24-15-29

Amount of Each Receipt this Period

124.00

SUBTOTAL of Receipts This Page (optional)

288.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Alicio Ruiz

Mailing Address 801 Brickell Avenue Suite 130

City

Miami

State

FL

Zip Code

33131-2951

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Security & Risk Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-25-13-46

Amount of Each Receipt this Period

124.00

B.

Full Name (Last, First, Middle Initial)

Richard Santoro

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Business Leader, Public Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-82-14-1

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Richard Santoro

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Business Leader, Public Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-81-12-0

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

324.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Joe Schuler

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Leader, Systems Programming

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 5 / 2 0 0 9

Transaction ID: 20090311-47-15-29

Amount of Each Receipt this Period

85.00

B.

Full Name (Last, First, Middle Initial)

Joe Schuler

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Leader, Systems Programming

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-47-13-46

Amount of Each Receipt this Period

85.00

C.

Full Name (Last, First, Middle Initial)

Joe Schuler

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Leader, Systems Programming

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-46-14-1

Amount of Each Receipt this Period

85.00

SUBTOTAL of Receipts This Page (optional)

255.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Joe Schuler

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Leader, Systems Programming

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-46-12-0

Amount of Each Receipt this Period

85.00

B.

Full Name (Last, First, Middle Initial)

Bob Selander

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 2 / 2 0 0 9

Transaction ID: EXS4LU210151

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Nancy Selander

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Spouse of Employee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 2 / 2 0 0 9

Transaction ID: EXS4LU344568

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

10085.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Scott Silverthorne

Mailing Address 1401 Eye Street Northwest Suite 2

City

Washington

State

DC

Zip Code

20005-2225

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Senior Business Leader, Global Public

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 5 / 2 0 0 9

Transaction ID: 20090114-45-12-0

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Scott Silverthorne

Mailing Address 1401 Eye Street Northwest Suite 2

City

Washington

State

DC

Zip Code

20005-2225

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Senior Business Leader, Global Public

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 9

Transaction ID: 20090212-76-11-38

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Scott Silverthorne

Mailing Address 1401 Eye Street Northwest Suite 2

City

Washington

State

DC

Zip Code

20005-2225

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Senior Business Leader, Global Public

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 5 / 2 0 0 9

Transaction ID: 20090311-79-15-29

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

900.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Scott Silverthorne

Mailing Address 1401 Eye Street Northwest Suite 2

City

Washington

State

DC

Zip Code

20005-2225

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Senior Business Leader, Global Public

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-79-13-46

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Scott Silverthorne

Mailing Address 1401 Eye Street Northwest Suite 2

City

Washington

State

DC

Zip Code

20005-2225

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Senior Business Leader, Global Public

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-77-14-1

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Eileen Simon

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 5 / 2 0 0 9

Transaction ID: 20090311-35-15-29

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Eileen Simon

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-36-13-46

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Eileen Simon

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-34-14-1

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Eileen Simon

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-34-12-0

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Edgar Smart

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Systems Support

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 9

Transaction ID: 20090212-34-11-38

Amount of Each Receipt this Period

124.00

B.

Full Name (Last, First, Middle Initial)

Edgar Smart

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Systems Support

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 5 / 2 0 0 9

Transaction ID: 20090311-36-15-29

Amount of Each Receipt this Period

124.00

C.

Full Name (Last, First, Middle Initial)

Edgar Smart

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Systems Support

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-37-13-46

Amount of Each Receipt this Period

124.00

SUBTOTAL of Receipts This Page (optional)

372.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Edgar Smart

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Systems Support

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-35-14-1

Amount of Each Receipt this Period

124.00

B.

Full Name (Last, First, Middle Initial)

Edgar Smart

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Systems Support

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-35-12-0

Amount of Each Receipt this Period

124.00

C.

Full Name (Last, First, Middle Initial)

Carey Smith

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Risk Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 0 9

Transaction ID: 20090212-46-11-38

Amount of Each Receipt this Period

124.00

SUBTOTAL of Receipts This Page (optional)

372.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 76 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Carey Smith

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Risk Management

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 5 / 2 0 0 9

Transaction ID: 20090311-49-15-29

Amount of Each Receipt this Period

124.00

B.

Full Name (Last, First, Middle Initial)

Carey Smith

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Risk Management

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-49-13-46

Amount of Each Receipt this Period

124.00

C.

Full Name (Last, First, Middle Initial)

Carey Smith

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Risk Management

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-48-14-1

Amount of Each Receipt this Period

124.00

SUBTOTAL of Receipts This Page (optional)

372.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Carey Smith

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Risk Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-48-12-0

Amount of Each Receipt this Period

124.00

B.

Full Name (Last, First, Middle Initial)

Patricia Smith

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Group Head, Info Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 5 / 2 0 0 9

Transaction ID: 20090114-55-12-0

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Patricia Smith

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Group Head, Info Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 0 9

Transaction ID: 20090212-8-11-38

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

724.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Patricia Smith

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Group Head, Info Technology

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 5 / 2 0 0 9

Transaction ID: 20090311-8-15-29

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Patricia Smith

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Group Head, Info Technology

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-8-13-46

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Patricia Smith

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Group Head, Info Technology

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-7-14-1

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

900.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Patricia Smith

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Group Head, Info Technology

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-7-12-0

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Bella Stavchansky

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

General Manager, Eastern Europe

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-23-14-1

Amount of Each Receipt this Period

42.00

C.

Full Name (Last, First, Middle Initial)

Bella Stavchansky

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

General Manager, Eastern Europe

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-23-12-0

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)

384.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Joseph Swezey

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Financial Analysis

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 9

Transaction ID: 20090212-40-11-38

Amount of Each Receipt this Period

124.00

B.

Full Name (Last, First, Middle Initial)

Joseph Swezey

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Financial Analysis

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 5 / 2 0 0 9

Transaction ID: 20090311-42-15-29

Amount of Each Receipt this Period

124.00

C.

Full Name (Last, First, Middle Initial)

Joseph Swezey

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Financial Analysis

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-42-13-46

Amount of Each Receipt this Period

124.00

SUBTOTAL of Receipts This Page (optional)

372.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 / 112

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Joseph Swezey

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Financial Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	5	/	2	0	9	

Transaction ID: 20090513-41-14-1

Amount of Each Receipt this Period

124.00

B.

Full Name (Last, First, Middle Initial)

Joseph Swezey

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Financial Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	5	/	2	0	9	

Transaction ID: 20090611-41-12-0

Amount of Each Receipt this Period

124.00

C.

Full Name (Last, First, Middle Initial)

Donna Terman

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Bus Resources-Communication

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	9	

Transaction ID: 20090212-35-11-38

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

398.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 82 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Donna Terman

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Bus Resources-Communication

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 5 / 2 0 0 9

Transaction ID: 20090311-37-15-29

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

Donna Terman

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Bus Resources-Communication

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-38-13-46

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

Donna Terman

Mailing Address 2000 Purchase Street

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Bus Resources-Communication

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-36-14-1

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 83 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Donna Terman

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Bus Resources-Communication

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-36-12-0

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

Stephen Treacy

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Business Leader, Fraud Reporting and A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-77-12-0

Amount of Each Receipt this Period

37.50

C.

Full Name (Last, First, Middle Initial)

Robert Trende

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Systems Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-1-14-1

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

237.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Robert Trende

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Systems Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-1-12-0

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Frank Tufano

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Group Head Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1740.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 5 / 2 0 0 9

Transaction ID: 20090114-38-12-0

Amount of Each Receipt this Period

290.00

C.

Full Name (Last, First, Middle Initial)

Frank Tufano

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Group Head Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1740.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 9

Transaction ID: 20090212-64-11-38

Amount of Each Receipt this Period

290.00

SUBTOTAL of Receipts This Page (optional)

630.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 85 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Frank Tufano

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Group Head Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1740.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 5 / 2 0 0 9

Transaction ID: 20090311-67-15-29

Amount of Each Receipt this Period

290.00

B.

Full Name (Last, First, Middle Initial)

Frank Tufano

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Group Head Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1740.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-67-13-46

Amount of Each Receipt this Period

290.00

C.

Full Name (Last, First, Middle Initial)

Frank Tufano

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Group Head Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1740.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-65-14-1

Amount of Each Receipt this Period

290.00

SUBTOTAL of Receipts This Page (optional)

870.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 86 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Frank Tufano

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Group Head Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1740.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-65-12-0

Amount of Each Receipt this Period

290.00

B.

Full Name (Last, First, Middle Initial)

Jeroen Van Erven

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Financial Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 5 / 2 0 0 9

Transaction ID: 20090311-46-15-29

Amount of Each Receipt this Period

303.57

C.

Full Name (Last, First, Middle Initial)

Jeroen Van Erven

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Financial Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-46-13-46

Amount of Each Receipt this Period

-53.57

SUBTOTAL of Receipts This Page (optional)

540.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 87 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Jeroen Van Erven

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Financial Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-45-14-1

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)

Jeroen Van Erven

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Financial Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-45-12-0

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

Timothy Westendorf

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Financial Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 5 / 2 0 0 9

Transaction ID: 20090311-44-15-29

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

325.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 88 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Timothy Westendorf

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Financial Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-44-13-46

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Timothy Westendorf

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Financial Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-43-14-1

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

Timothy Westendorf

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Financial Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-43-12-0

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 89 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Mimi Wood

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 9

Transaction ID: 20090212-47-11-38

Amount of Each Receipt this Period

124.00

B.

Full Name (Last, First, Middle Initial)

Mimi Wood

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 5 / 2 0 0 9

Transaction ID: 20090311-50-15-29

Amount of Each Receipt this Period

124.00

C.

Full Name (Last, First, Middle Initial)

Mimi Wood

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-50-13-46

Amount of Each Receipt this Period

124.00

SUBTOTAL of Receipts This Page (optional)

372.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 90 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Mimi Wood

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-49-14-1

Amount of Each Receipt this Period

124.00

B.

Full Name (Last, First, Middle Initial)

Mimi Wood

Mailing Address 2000 Purchase Street

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-49-12-0

Amount of Each Receipt this Period

124.00

C.

Full Name (Last, First, Middle Initial)

Kent Young

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Business Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 0 9

Transaction ID: 20090212-45-11-38

Amount of Each Receipt this Period

130.00

SUBTOTAL of Receipts This Page (optional)

378.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 91 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Kent Young

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Business Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 5 / 2 0 0 9

Transaction ID: 20090311-48-15-29

Amount of Each Receipt this Period

130.00

B.

Full Name (Last, First, Middle Initial)

Kent Young

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Business Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: 20090415-48-13-46

Amount of Each Receipt this Period

130.00

C.

Full Name (Last, First, Middle Initial)

Kent Young

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Business Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: 20090513-47-14-1

Amount of Each Receipt this Period

130.00

SUBTOTAL of Receipts This Page (optional)

390.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 92 / 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Kent Young

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

VP/Business Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-47-12-0

Amount of Each Receipt this Period

130.00

B.

Full Name (Last, First, Middle Initial)

Kelly Zabel

Mailing Address 2200 Mastercard Boulevard

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard

Occupation

Audit Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 20090611-64-12-0

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

170.00

TOTAL This Period (last page this line number only)

69185.50

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 93 / 112

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

PNC Bank

Mailing Address 411 King St.

City
Alexandria

State
VA

Zip Code
22314

Purpose of Disbursement
Credit Card Fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 6a6e1663a8fce9add1c

Date of Disbursement

03 / 03 / 2009

Amount of Each Disbursement this Period

286.07

B.

Full Name (Last, First, Middle Initial)

PNC Bank

Mailing Address 411 King St.

City
Alexandria

State
VA

Zip Code
22314

Purpose of Disbursement
Bank Service Charge

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 0ba13bf28d0c4284202

Date of Disbursement

04 / 01 / 2009

Amount of Each Disbursement this Period

3.00

C.

Full Name (Last, First, Middle Initial)

PNC Bank

Mailing Address 411 King St.

City
Alexandria

State
VA

Zip Code
22314

Purpose of Disbursement
Credit Card Fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: f839770552c9c7b5768

Date of Disbursement

04 / 03 / 2009

Amount of Each Disbursement this Period

42.96

SUBTOTAL of Disbursements This Page (optional) ▶

332.03

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 94 / 112

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) PNC Bank</p> <p>Mailing Address 411 King St.</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Bank Service Charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: b0b6f84ea64d5f17456</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3.00"/></p> <p><input type="text" value="001"/> Category/Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) PNC Bank</p> <p>Mailing Address 411 King St.</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Credit Card Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 701f3c5b6996ef840e8</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="160.35"/></p> <p><input type="text" value="001"/> Category/Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) PNC Bank</p> <p>Mailing Address 411 King St.</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Bank Service Charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: aa4119b8d01307c3ad7</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3.00"/></p> <p><input type="text" value="001"/> Category/Type</p>

SUBTOTAL of Disbursements This Page (optional)

166.35

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 95 / 112

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

PNC Bank

Mailing Address 411 King St.

City
Alexandria

State
VA

Zip Code
22314

Purpose of Disbursement
Credit Card Fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 5225dbfef139aa186f1

Date of Disbursement

MM / DD / YYYY
06 / 03 / 2009

Amount of Each Disbursement this Period

48.00

SUBTOTAL of Disbursements This Page (optional)

48.00

TOTAL This Period (last page this line number only)

546.38

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 96 / 112

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A. Full Name (Last, First, Middle Initial) Andre Carson for Congress	Transaction ID: 9069f94b945c0f4acb7 Date of Disbursement																				
Mailing Address 603 East Washington #100	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	8		2	0	0	9												
City Indianapolis State IN Zip Code 46204	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 Primary	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Andre Carson	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General State: IN District: 07 <input type="checkbox"/> Other (specify) ▼																					
B. Full Name (Last, First, Middle Initial) Bennett Election Committee Inc	Transaction ID: be61d26bfc8337849c7 Date of Disbursement																				
Mailing Address 175 South West Temple Suite 650	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	7		2	0	0	9												
City Salt Lake City State UT Zip Code 84101	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 Primary	<table border="1"> <tr> <td colspan="10">2500.00</td> </tr> </table>	2500.00																			
2500.00																					
Candidate Name Robert F. Bennett	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General State: UT District: <input type="checkbox"/> Other (specify) ▼																					
C. Full Name (Last, First, Middle Initial) Bennett Election Committee Inc	Transaction ID: a2f61646882bf4972f5 Date of Disbursement																				
Mailing Address 175 South West Temple Suite 650	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	2		2	0	0	9												
City Salt Lake City State UT Zip Code 84101	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 Primary	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Robert F. Bennett	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General State: UT District: <input type="checkbox"/> Other (specify) ▼																					
SUBTOTAL of Disbursements This Page (optional)	<table border="1"> <tr> <td>4500.00</td> </tr> </table>	4500.00																			
4500.00																					
TOTAL This Period (last page this line number only)	<table border="1"> <tr> <td></td> </tr> </table>																				

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 97 / 112

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A. Full Name (Last, First, Middle Initial) Cantor for Congress	Transaction ID: 917c547ac1d7b93d59e Date of Disbursement																				
Mailing Address PO Box 17813	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	8		2	0	0	9												
City Richmond State VA Zip Code 23226	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 Primary Candidate Name Eric I. Cantor	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: VA District: 07	Category/ Type 011																				
B. Full Name (Last, First, Middle Initial) Citizens for Arlen Specter	Transaction ID: 839f9cd66bf840aa792 Date of Disbursement																				
Mailing Address 236 Massachusetts Avenue NE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	7		2	0	0	9												
City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 Primary Candidate Name Arlen Specter	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: PA District:	Category/ Type 011																				
C. Full Name (Last, First, Middle Initial) Cleaver for Congress	Transaction ID: ff1119e7954dfa17221 Date of Disbursement																				
Mailing Address 4801 Main Street, Suite 1000	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	7		2	0	0	9												
City Kansas City State MO Zip Code 64112	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 Primary Candidate Name Emanuel Cleaver	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MO District: 05	Category/ Type 011																				

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 98 / 112

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A. Full Name (Last, First, Middle Initial) Crowley for Congress	Transaction ID: d3cc4c1a4babc19550c Date of Disbursement																				
Mailing Address 84-56 Grand Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	0	9												
City Elmhurst State NY Zip Code 11373	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 Primary	<table border="1"> <tr> <td colspan="10">2500.00</td> </tr> </table>	2500.00																			
2500.00																					
Candidate Name Joseph Crowley	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 07	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Democratic Senatorial Campaign Committee	Transaction ID: eb8ef72a7ecad4604d3 Date of Disbursement																				
Mailing Address 120 Maryland Avenue NE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	7		2	0	0	9												
City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2009 Contribution	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Candidate Name Democratic Senatorial Campaign Committee	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution																				
C. Full Name (Last, First, Middle Initial) Devin Nunes Campaign Committee	Transaction ID: d8fdafa9f709a17244f Date of Disbursement																				
Mailing Address PO Box 6545	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	2		2	0	0	9												
City Visalia State CA Zip Code 93290	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 Primary	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Devin G. Nunes	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 21	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 99 / 112

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A. Full Name (Last, First, Middle Initial) Ed Royce for Congress	Transaction ID: a631964e95130382fba Date of Disbursement																				
Mailing Address PO Box 2525	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	9		2	0	0	9												
City Orange State CA Zip Code 92859	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 Primary Candidate Name Edward R. Royce	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 40	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type 011																					
B. Full Name (Last, First, Middle Initial) Evan Bayh Committee	Transaction ID: 025a687cbb8cac7053d Date of Disbursement																				
Mailing Address 850 Fort Wayne Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	8		2	0	0	9												
City Indianapolis State IN Zip Code 46204	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 General Candidate Name Evan Bayh	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IN District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type 011																					
C. Full Name (Last, First, Middle Initial) Financial Services Roundtable Pac	Transaction ID: 089bb664d447f171c8d Date of Disbursement																				
Mailing Address 1001 Pennsylvania Avenue, NW Suite 500 South	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	2		2	0	0	9												
City Washington State DC Zip Code 20004	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2009 Contribution Candidate Name Financial Services Roundtable Pac	<table border="1"> <tr> <td colspan="10">2500.00</td> </tr> </table>	2500.00																			
2500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution																				
Category/Type 011																					
SUBTOTAL of Disbursements This Page (optional)	<table border="1"> <tr> <td colspan="10">4500.00</td> </tr> </table>	4500.00																			
4500.00																					
TOTAL This Period (last page this line number only)	<table border="1"> <tr> <td colspan="10"></td> </tr> </table>																				

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 100 / 112

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Freedom Project; the</p> <p>Mailing Address 631-B Pennsylvania Ave., SE Basement Unit</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement 2009 Contribution</p> <p>Candidate Name Freedom Project; the</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: bbd90666e621d423932</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 7 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Friends of Carolyn McCarthy</p> <p>Mailing Address 151 Linden Road</p> <p>City Mineola State NY Zip Code 11501</p> <p>Purpose of Disbursement 2010 Primary</p> <p>Candidate Name Carolyn McCarthy</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 04</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: ff8ddf78cc1268402c8</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Friends of Dan Maffei</p> <p>Mailing Address PO Box 74</p> <p>City Syracuse State NY Zip Code 13214</p> <p>Purpose of Disbursement 2010 Primary</p> <p>Candidate Name Daniel Benjamin Maffei</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: e1443fa7497ef54ce1c</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A. Full Name (Last, First, Middle Initial) Friends of Dennis Cardoza Mailing Address PO Box 2749	Transaction ID: 6517c3000943e20940f Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 7 / 2 0 0 9</div> </div>
City Merced State CA Zip Code 95340 Purpose of Disbursement 2010 Primary Candidate Name Dennis A. Cardoza Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 18	Amount of Each Disbursement this Period <div>1000.00</div> <div>011</div> Category/ Type
B. Full Name (Last, First, Middle Initial) Friends of Erik Paulsen Mailing Address PO Box 44369 250 Prairie Center Drive City Eden Prairie State MN Zip Code 55344 Purpose of Disbursement 2010 Primary Candidate Name Erik Paulsen Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MN District: 03	Transaction ID: 9f06c28f26457eaaf47 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 8 / 2 0 0 9</div> </div> Amount of Each Disbursement this Period <div>1000.00</div> <div>011</div> Category/ Type
C. Full Name (Last, First, Middle Initial) Friends of Jeb Hensarling Mailing Address PO Box 820504 City Dallas State TX Zip Code 75382 Purpose of Disbursement 2010 Primary Candidate Name Thomas Jeb Hensarling Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TX District: 05	Transaction ID: bc3ba229787b89f2d2e Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 7 / 2 0 0 9</div> </div> Amount of Each Disbursement this Period <div>5000.00</div> <div>011</div> Category/ Type

SUBTOTAL of Disbursements This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 102 / 112

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Friends of Schumer

Mailing Address 509 Madison Ave Suite 1902

City State Zip Code
New York NY 10022Purpose of Disbursement
2010 PrimaryCandidate Name
Charles E. Schumer011
Category/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District:

Transaction ID: f479be8c68fe3156652

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	8	/	2	0	0	9

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

Gillibrand for Senate

Mailing Address 313 C Street NE

City State Zip Code
Washington DC 20002Purpose of Disbursement
2010 Special ElectionCandidate Name
Kirsten E. Gillibrand011
Category/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☐ General
☒ Other (specify) ▼

State: NY District:

Special

Transaction ID: 26858f0bf5723ee1ce1

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	7	/	2	0	0	9

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Gillibrand for Senate

Mailing Address 313 C Street NE

City State Zip Code
Washington DC 20002Purpose of Disbursement
2010 PrimaryCandidate Name
Kirsten E. Gillibrand011
Category/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District:

Transaction ID: 3ed269873f099b0d30a

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	2	/	2	0	0	9

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Grassley Committee Inc

Mailing Address PO Box 1000

City
Des Moines

State
IA

Zip Code
50304

Purpose of Disbursement
2010 Primary

Candidate Name
Charles E. Grassley

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: IA District:

Transaction ID: 5638bd5cfcaf6ca220a

Date of Disbursement

03 / 30 / 2009

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

Growth and Prosperity Political Action Committee

Mailing Address 831 Linwood Court
Suite 300

City
Birmingham

State
AL

Zip Code
35222

Purpose of Disbursement
2009 Contribution

Candidate Name
Growth and Prosperity Political Action Committee

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Contribution

Transaction ID: b2e2da20fd622093b58

Date of Disbursement

06 / 29 / 2009

Amount of Each Disbursement this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

Jim Himes for Congress

Mailing Address 857 Post Road, #312
Box 456

City
Fairfield

State
CT

Zip Code
06824

Purpose of Disbursement
2010 Primary

Candidate Name
James A. Himes

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: CT District: 04

Transaction ID: 54d7a014ae1a8e53818

Date of Disbursement

03 / 30 / 2009

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A. Full Name (Last, First, Middle Initial) Jim Jordan for Congress	Transaction ID: 6a4ee23e37973f816ed Date of Disbursement																				
Mailing Address 1709 State Route 560 South	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	8		2	0	0	9												
City Urbana State OH Zip Code 43078	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 Primary Candidate Name James Jordan	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 04 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type <table border="1"> <tr> <td>011</td> </tr> </table>	011																			
011																					
B. Full Name (Last, First, Middle Initial) Kendrick Meek for Florida	Transaction ID: 994331c56a29aeafa34 Date of Disbursement																				
Mailing Address 111 NW 183rd Street Suite 325	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	8		2	0	0	9												
City Miami State FL Zip Code 33169	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 Primary Candidate Name Kendrick B. Meek	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type <table border="1"> <tr> <td>011</td> </tr> </table>	011																			
011																					
C. Full Name (Last, First, Middle Initial) Kevin McCarthy for Congress	Transaction ID: 8439b4b61018ed5cd3c Date of Disbursement																				
Mailing Address PO Box 12667	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	7		2	0	0	9												
City Bakersfield State CA Zip Code 93389	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 Primary Candidate Name Kevin McCarthy	<table border="1"> <tr> <td colspan="10">2500.00</td> </tr> </table>	2500.00																			
2500.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 22 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type <table border="1"> <tr> <td>011</td> </tr> </table>	011																			
011																					

SUBTOTAL of Disbursements This Page (optional)

12500.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Kevin McCarthy for Congress

Mailing Address PO Box 12667

City
BakersfieldState
CAZip Code
93389Purpose of Disbursement
Org Contr. 3/17/2009 - VoidCandidate Name
Kevin McCarthy011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 22

Transaction ID: f65934c0a0263860a6b

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	8		2	0	0	9

Amount of Each Disbursement this Period

-2500.00

B.

Full Name (Last, First, Middle Initial)

Kind for Congress Committee

Mailing Address 205 5th Avenue South
Suite 428City
La CrosseState
WIZip Code
54601Purpose of Disbursement
2010 PrimaryCandidate Name
Ron Kind011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: WI District: 03

Transaction ID: 1c354f64e79e9ec37ec

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	0		2	0	0	9

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Leahy for U.S. Senator Committee

Mailing Address PO Box 1042

City
MontpelierState
VTZip Code
05601Purpose of Disbursement
2010 GeneralCandidate Name
Patrick Leahy011
Category/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: VT District:

Transaction ID: 334a3824ba15f9b0610

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	8		2	0	0	9

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

-500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 106 / 112

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A. Full Name (Last, First, Middle Initial) Lynn Jenkins for Congress	Transaction ID: 43cbdcc9af6ec2d5b40 Date of Disbursement																				
Mailing Address PO Box 1441	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	8		2	0	0	9												
City Topeka State KS Zip Code 66601	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 Primary Candidate Name Lynn Jenkins	<table border="1"> <tr> <td colspan="10">2000.00</td> </tr> </table>	2000.00																			
2000.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 02	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type 011																					
B. Full Name (Last, First, Middle Initial) Majority Committee Pac--Mc Pac	Transaction ID: 1c5f48916e93753a7c3 Date of Disbursement																				
Mailing Address PO Box 10134	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	8		2	0	0	9												
City Bakersfield State CA Zip Code 93389	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2009 Contribution Candidate Name Majority Committee Pac--Mc Pac	<table border="1"> <tr> <td colspan="10">2500.00</td> </tr> </table>	2500.00																			
2500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼																				
Category/Type 011																					
C. Full Name (Last, First, Middle Initial) Meeks for Congress	Transaction ID: 43521e0b2b0e67152fb Date of Disbursement																				
Mailing Address 153-01 Jamaica Ave. Suite 535 219-10 South Conduit Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	7		2	0	0	9												
City Jamaica State NY Zip Code 11432	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 Primary Candidate Name Gregory W. Meeks	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 06	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type 011																					

SUBTOTAL of Disbursements This Page (optional)

5500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 107 / 112

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A. Full Name (Last, First, Middle Initial) Melissa Bean for Congress	Transaction ID: 5d565c9157b3f96d32b Date of Disbursement																				
Mailing Address PO Box 3068	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	7		2	0	0	9												
City Barrington State IL Zip Code 60010	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 Primary	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Candidate Name Melissa Luburich Bean	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General State: IL District: 08 <input type="checkbox"/> Other (specify) ▼																					
B. Full Name (Last, First, Middle Initial) National Republican Congressional Committee	Transaction ID: 59ab2079c459b28c3cc Date of Disbursement																				
Mailing Address 320 First Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	7		2	0	0	9												
City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2009 Contribution	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Candidate Name National Republican Congressional Committee	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General State: District: <input checked="" type="checkbox"/> Other (specify) ▼ Contribution																					
C. Full Name (Last, First, Middle Initial) Neugebauer Congressional Committee	Transaction ID: ca90f0f58d3f1e7c433 Date of Disbursement																				
Mailing Address PO Box 54175	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	7		2	0	0	9												
City Lubbock State TX Zip Code 79453	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 Primary	<table border="1"> <tr> <td colspan="10">2000.00</td> </tr> </table>	2000.00																			
2000.00																					
Candidate Name Randy Neugebauer	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General State: TX District: 19 <input type="checkbox"/> Other (specify) ▼																					

SUBTOTAL of Disbursements This Page (optional)

12000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

New Democrat Coalition Political Action Committee Aka
Ndc Pac

Mailing Address 607 14th Street NW Suite 800

City
WashingtonState
DCZip Code
20005Purpose of Disbursement
2009 Contribution

011

Category/
TypeCandidate Name
New Democrat Coalition Political Action Committee
Aka Ndc Pac

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2009

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Contribution

Transaction ID: 7bd31a492cf8aafbbf1

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	0	9

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

People for Enterprise Trade and Economic Growth

Mailing Address 7804 Evening Lane

City
AlexandriaState
VAZip Code
22306Purpose of Disbursement
2009 Contribution

011

Category/
TypeCandidate Name
People for Enterprise Trade and Economic Growth

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2009

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Contribution

Transaction ID: 90bbd624057333937fc

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	0	9

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Price for Congress

Mailing Address PO Box 425

City
RoswellState
GAZip Code
30077Purpose of Disbursement
2010 Primary

011

Category/
TypeCandidate Name
Thomas E. Price

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: GA

District: 06

Transaction ID: 65b561e0b3a590a165e

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	0	9

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A. Full Name (Last, First, Middle Initial) Rogers for Congress	Transaction ID: 96a0bbe62b0d210e2cd Date of Disbursement																				
Mailing Address PO Box 581 Post Office Box 581	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	2		2	0	0	9												
City Brighton State MI Zip Code 48116	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 Primary Candidate Name Mike Rogers Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General State: MI District: 08 Other (specify) ▼	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Category/Type 011																					
B. Full Name (Last, First, Middle Initial) Roskam for Congress Committee	Transaction ID: dbfec6ac8a3215ffcb3 Date of Disbursement																				
Mailing Address PO Box 713	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	8		2	0	0	9												
City Wheaton State IL Zip Code 60187	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 Primary Candidate Name Peter J. Roskam Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General State: IL District: 06 Other (specify) ▼	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Category/Type 011																					
C. Full Name (Last, First, Middle Initial) Schock for Congress	Transaction ID: 1e490c841df8b350951 Date of Disbursement																				
Mailing Address PO Box 10555	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	7		2	0	0	9												
City Peoria State IL Zip Code 61612	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 Primary Candidate Name Aaron Schock Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General State: IL District: 18 Other (specify) ▼	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Category/Type 011																					

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A. Full Name (Last, First, Middle Initial) Senate Majority Fund	Transaction ID: a2933f19ce3887d8b62 Date of Disbursement
Mailing Address PO Box 32025	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 2 / 2 0 0 9</div> </div>
City Phoenix State AZ Zip Code 85064	Amount of Each Disbursement this Period
Purpose of Disbursement 2009 Contribution Candidate Name Senate Majority Fund Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Contribution	<div> <div>2000.00</div> <div>011</div> <div>Category/Type</div> </div>
B. Full Name (Last, First, Middle Initial) Steve Austria for Congress	Transaction ID: 1fc02a2bbaaa81d52ff Date of Disbursement
Mailing Address 20 S Limestone St Suite 390	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 8 / 2 0 0 9</div> </div>
City Springfield State OH Zip Code 45502	Amount of Each Disbursement this Period
Purpose of Disbursement 2010 Primary Candidate Name Steven Austria Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 07	<div> <div>500.00</div> <div>011</div> <div>Category/Type</div> </div>
C. Full Name (Last, First, Middle Initial) Team Emerson for Jo Ann Emerson	Transaction ID: f470d9c2c4f4c4658ce Date of Disbursement
Mailing Address PO Box 822 400 Broadway, Suite 501	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 2 / 2 0 0 9</div> </div>
City Cape Girardeau State MO Zip Code 63702	Amount of Each Disbursement this Period
Purpose of Disbursement 2010 Primary Candidate Name Jo Ann Emerson Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MO District: 08	<div> <div>1000.00</div> <div>011</div> <div>Category/Type</div> </div>

SUBTOTAL of Disbursements This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 111 / 112

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A. Full Name (Last, First, Middle Initial) Texans for Lamar Smith	Transaction ID: 43c5517865322099967 Date of Disbursement
Mailing Address PO Box 6155	<div> <div>05</div> <div>08</div> <div>2009</div> </div>
City San Antonio State TX Zip Code 78209	Amount of Each Disbursement this Period
Purpose of Disbursement 2010 Primary Candidate Name Lamar Smith	<div>1000.00</div> <div>011 Category/ Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 21 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Texans for Lamar Smith	Transaction ID: c168dc91d101a8281d8 Date of Disbursement
Mailing Address PO Box 6155	<div> <div>06</div> <div>29</div> <div>2009</div> </div>
City San Antonio State TX Zip Code 78209	Amount of Each Disbursement this Period
Purpose of Disbursement 2010 Primary Candidate Name Lamar Smith	<div>1000.00</div> <div>011 Category/ Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 21 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Wasserman-Schultz for Congress	Transaction ID: 7529e2797649ec1b440 Date of Disbursement
Mailing Address 1071 Twin Branch Ln	<div> <div>06</div> <div>29</div> <div>2009</div> </div>
City Weston State FL Zip Code 33326	Amount of Each Disbursement this Period
Purpose of Disbursement 2010 Primary Candidate Name Debbie Wasserman Schultz	<div>1000.00</div> <div>011 Category/ Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 20 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

92500.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 112 / 112

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Mike Pillatsch

Mailing Address 8755 West Higgins Road

City
Chicago

State
IL

Zip Code
60631-2708

Purpose of Disbursement
Partial Refund of 2009 Contribution

Candidate Name

010
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: f8237cd144515b8913a

Date of Disbursement

06 / 22 / 2009

Amount of Each Disbursement this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Jane Sinnott

Mailing Address 2000 Purchase Street

City
Purchase

State
NY

Zip Code
10577-2405

Purpose of Disbursement
Partial Refund of 2009 Contribution

Candidate Name

010
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 8baf27aaa802e8a2225

Date of Disbursement

04 / 20 / 2009

Amount of Each Disbursement this Period

100.00

SUBTOTAL of Disbursements This Page (optional)

400.00

TOTAL This Period (last page this line number only)

400.00